



**California State Board of Pharmacy**  
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Business, Consumer Services and Housing Agency  
Department of Consumer Affairs  
Gavin Newsom, Governor



## INDIVIDUAL FINANCIAL AFFIDAVIT

This form is to be completed by each **natural person** as instructed on a license application or any new natural person as instructed on a Change of Permit Application.

### 1. PERSONAL INFORMATION

Legal Last Name                      Legal First Name                      Middle Name

### 2. APPLICANT/LICENSEE INFORMATION

List the name of the applicant applying for a license as listed in item 1A of the license application OR the licensee of a change of permit application.                      License #, if applicable \_\_\_\_\_

Applicant's Name as it will appear on the license or Licensee's Name

Location of Business              Street                      City                      State                      Zip Code

### 3. CHECK ONE OR MORE OF THE FOLLOWING:

- ☐ I am making a contribution: Total amount \$ \_\_\_\_\_ Cash amount \$ \_\_\_\_\_
- ☐ I am contributing labor/expertise only valued at \$ \_\_\_\_\_
- ☐ I am receiving a loan: total amount \$ \_\_\_\_\_ (please attach copy of loan agreement)
- ☐ I am making a loan: total amount \$ \_\_\_\_\_ (please attach copy of the loan agreement)
- ☐ I am not making a contribution in any form.

### 4. SOURCE OF FUNDS USED TO FINANCE BUSINESS (Sections A-E).

Fully explain the source of your financial contributions (*e.g.*, stocks/bonds, real estate). If cash funds are from savings, indicate where the money was or is kept. If the source is from the sale of property, indicate what was sold, the address (if real estate), the name and address of the buyer, and the net proceeds from the sale. If a loan is involved, show the date, amount, terms, security, and name and address of the lender. Describe any other sources of funds such as inheritances or gifts. Documentation may be requested.

- A. FINANCIAL INSTITUTION(S).** If cash funds are from savings and/or checking accounts, identify the account information from where the money is derived. For each account listed below, provide unredacted bank statements reflecting the deposit(s) or transfer(s) into the account(s) of the monies to be used to fund the business. In addition, include three months of unredacted bank statements prior to the deposit(s) or transfer(s).

#### SAVINGS

Financial Institution	City and State	Amount	Account Number	Source of Savings

**CHECKING**

Financial Institution	City and State	Amount	Account Number	Source of Checking

**B. LOANS & CREDIT APPLICATIONS FOR THIS BUSINESS**

If a loan is involved, show the date, amount, terms, security, and name and address of the lender.

Date	Amount	Term	Item Secured	Security	Lender

**C. SALE OF PROPERTY TO FINANCE THIS BUSINESS**

If the source is from the sale of property, indicate what was sold, the address (if real estate), the name and address of the buyer, and the net proceeds from the sale.

Type	Date	Buyer	Net Proceeds	Other Source

Location of Property: \_\_\_\_\_

Type	Date Sold	Buyer	Net Proceeds	Other Source

Location of Property: \_\_\_\_\_

**D. GIFT OR INHERITANCE(S)**

Describe any other sources of funds such as inheritances or gifts. Documentation may be requested.

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**E. FUNDING**

Will funding be provided in any amount from a person whose professional or vocational license has been denied or whose license has been revoked, suspended, placed on probation, or otherwise disciplined in California or any other state, jurisdiction, territory, or country?

Yes \_\_\_\_ No \_\_\_\_ If Yes, please explain fully below (attach additional sheets if necessary). Attach copies of all disciplinary orders.

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**5. Current and Past Employment for the last five years.**

From mm/yr	To mm/yr	Type of Work	Firm Name and City	License #, if applicable

An original signature and date is required or a digital signature that complies with the Board's [Digital Signatures Policy Statement](#) located on the Board's website. All documents with digital signatures shall be emailed to the Board.

I hereby certify under the laws of the State of California to the truth and accuracy of all statements, answers, and representations made in the foregoing Individual Financial Affidavit, including all supplementary statements. I understand that falsification of any information in this form may constitute grounds for denial or subsequent revocation of the license being applied for by the applicant or licensee identified in Section 2 of this form.

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Signature

Title

Date